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PTO/SB/05 (4/98)

Approved for use through 09/30/2000. OMB 0651-0032  
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <input checked="" type="checkbox"/> for new nonprovisional applications under 37 C.F.R. § 1.53(b)		Attorney Docket No.	705558US1
		First Inventor or Application Identifier	James C Ori, et al.
		Title	Structural Member For A Vehicle Frame Assembly
		Express Mail Label No.	EL536119204US
<b>APPLICATION ELEMENTS</b> See MPEP Chapter 600 concerning utility patent application contents.		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231	

1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)		5. <input type="checkbox"/> Microfiche Computer Program (Appendix)	
2. <input checked="" type="checkbox"/> Specification [Total Pages 16] (preferred arrangement set forth below) <ul style="list-style-type: none"> <li>-Descriptive title of the Invention</li> <li>-Cross References to Related Applications</li> <li>-Statement Regarding Fed Sponsored R&amp;D</li> <li>-Reference to Microfiche Appendix</li> <li>-Background of the Invention</li> <li>-Brief Summary of the Invention</li> <li>-Brief Description of the Drawings (if filed)</li> <li>-Detailed Description</li> <li>-Claims(s)</li> <li>-Abstract of the Disclosure</li> </ul>		6. Nucleotide and/or Amino Acid Sequence Submission (If applicable, all necessary) <ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Computer Readable Copy</li> <li>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</li> <li>c. <input type="checkbox"/> Statement verifying identity of above copies</li> </ul>	
<b>ACCOMPANYING APPLICATION PARTS</b>			
7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))			
8. <input type="checkbox"/> 37 C.F.R. § 3.37(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)			
9. <input type="checkbox"/> English Translation Document (if applicable)			
10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations			
11. <input type="checkbox"/> Preliminary Amendment			
12. <input checked="" type="checkbox"/> Return Receipt Postcard MPEP 503)			
13. <input type="checkbox"/> Statement(s) <input type="checkbox"/> Statement filed in prior (PTO/SB/09-12) application, Status still proper and desired			
14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)			
15. <input type="checkbox"/> Other:			

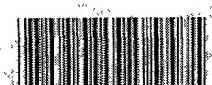
\*NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

16. If a **CONTINUING APPLICATION**, Check appropriate box, and supply the requisite information below and in a preliminary amendment:  
 Continuation  Divisional  Continuation-in-part (CIP) of prior application No. \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_  
**FOR CONTINUATION OR DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

### 17. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label <b>24938</b> (Insert Customer No. or Attach bar code label here)		<input type="checkbox"/> Correspondence address below			
Name	Mark P. Calcaterra DaimlerChrysler Intellectual Capital Corporation				
Address	CIMS 483-02-19 800 Chrysler Drive				
City	Auburn Hills	State	Michigan	Zip Code	48326-2757
Country	United States	Telephone	(248) 944-6500	Fax	(248) 944-6537

**24938**

PATENT TRADEMARK OFFICE

Name (Print or Type)	Mark P. Calcaterra	Registration No.	30,363
Signature	<i>Mark P. Calcaterra</i>	Date	<i>August 28, 2001</i>

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

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**FEE TRANSMITTAL**  
**For FY 2001**

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.**TOTAL AMOUNT OF PAYMENT** (\$ 710)

Complete if Known	
Application Number	
Filing Date	
First Named Inventor	James C Ori
Examiner Name	
Group / Art Unit	
Attorney Docket No.	705558US1

**METHOD OF PAYMENT** (check one)

- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number

03-1800
DaimlerChrysler Intellectual Capital Corporation

- Charge Any Additional Fee Required Under  
37 CFR 1.16 and 1.17

 Payment Enclosed:

- Check  Money Order  Other

**FEE CALCULATION****I. BASIC FILING FEE**

Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
101	201	355 Utility filing fee	710
106	206	160 Design filing fee	
107	207	245 Plant filing fee	
108	208	355 Reissue filing fee	
114	214	75 Provisional filing fee	
<b>SUBTOTAL (1)</b>			710

**II. EXTRA CLAIM FEES**

Total Claims	Extra Claim	Fee from below	Fee Paid
16	-20** = 0	X 0 = 0	0
Independent Claims	1	- 3** = 0	0
Multiple Dependent ** or number previously paid, if greater; For Reissues, see below		270	0

Large Entity Fee Code	Small Entity Fee Code	Fee Description
103	18	203 9 Claims in excess of 20
102	80	202 40 Independent claims in excess of 3
104	270	204 135 Multiple dependent claim, if not paid
109	80	209 40 ** Reissue independent claims over original patent
110	18	210 9 ** Reissue claims in excess of 20 and over original patent
<b>SUBTOTAL (2)</b>		

3. ADDITIONAL FEES	Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
105	130	205	65 Surcharge-late filing fee or oath	
127	50	227	25 Surcharge-late provisional filing fee or cover sheet	
139	130	139	130 Non-English specification	
147	2,520	147	2,520 For filing a request for examination	
112	920*	112	920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840* Requesting publication of SIR after Examiner action	
115	110	215	55 Extension for reply within first month	
116	390	216	195 Extension for reply within second month	
117	890	217	445 Extension for reply within third month	
118	1,390	218	695 Extension for reply within fourth month	
128	1,890	228	945 Extension for reply within fifth month	
119	310	219	155 Notice of Appeal	
120	310	220	155 Filing a brief in support of an appeal	
121	270	221	135 Request for oral hearing	
138	1,510	138	1,510 Petition to institute a public use proceeding	
140	110	240	55 Petition to revive - unavoidable	
141	1,240	241	620 Petition to revive - unintentional	
142	1,240	242	620 Utility issue fee (or reissue)	
143	440	243	220 Design issue fee	
144	600	244	300 Plant issue fee	
122	130	122	130 Petitions to the Commissioner	
123	50	123	50 Petitions related to provisional applications	
126	180	126	180 Submission of Information Disclos. Stmt.	
581	40	581	40 Recording of each patent assignment per property (times number of properties)	
146	710	246	355 Filing a submission after final rejection (37 CFR 1.129(a))	
149	710	249	355 For each additional invention to be examined (34 CFR 1.129(b))	
Other fee (specify) _____				
Other fee (specify) _____				

\* Reduced by Basic Filing Fee Paid    **SUBTOTAL (3)** (\$ 0)

SUBMITTED BY		Complete (if applicable)	
Typed or Printed Name	Mark P. Calcaterra	Reg. Number	30,363
Signature	<i>Mark P. Calcaterra</i>	Date	August 28, 2001
			Deposit Account User ID